

| POSITION            | INITIALS | ID NO.  | DATE    |
|---------------------|----------|---------|---------|
| FEE DETERMINATION   | VT       | 6107 16 | 6/4/99  |
| O.I.P.E. CLASSIFIER |          |         | 6/9/99  |
| FORMALITY REVIEW    | DB       | 605373  | 6/23/97 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date    |
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| Final    |         |
| Original |         |
| 1        | 2/2/96  |
| 2        | 7/12/96 |
| 3        | 3/2/97  |
| 4        | 9/16/97 |
| 5        | 4-10-98 |
| 6        | 9-29-98 |
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| Claim    | Date    |
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| Final    |         |
| Original |         |
| 51       | 2/2/96  |
| 52       | 7/12/96 |
| 53       | 3/2/97  |
| 54       | 9/16/97 |
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| Claim    | Date |
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| Final    |      |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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